

# LOCAL TELEPHONE COMPANY

## ANNUAL REPORT

OF THE

RECEIVED  
03/30/16  
ARK PUBLIC SERVICE COMM  
AUDIT SECTION

NAME **Matrix Telecom, Inc. d/b/a Matrix Business Technologies, Vartec Telecom;  
Excel Telecommunications, Americatel**

(Here show in full the exact corporate, firm or individual name of the respondent)

LOCATED AT **124 West Capitol Avenue, Suite 1900, Little Rock, AR 72201-3736**

(Here give the location, including street and number of the respondent's main business office within the State)

COMPANY# **177**

(Here give the APSC-assigned company number)

TO THE

**ARKANSAS PUBLIC SERVICE COMMISSION**



## COVERING ALL OPERATIONS

FOR THE YEAR ENDING DECEMBER 31, 2015

## LETTER OF TRANSMITTAL

## LEC-2

## REPORT TO THE ARKANSAS PUBLIC SERVICE COMMISSION

### GENERAL INSTRUCTIONS, DEFINITIONS, ETC.

- 1 Two (2) copies of this report, properly filled out and verified shall be filed with the Utility Division of the Arkansas Public Service Commission, Little Rock, Arkansas, on or before the 31st day of March following the close of the calendar year for which the report is made.
- 2 The word "respondent" in the following inquiries means the person, firm, association or company in whose behalf the report is made.
- 3 If any schedule does not apply to the respondent, such fact should be shown on the schedule by the words "not applicable."
- 4 Except in cases where they are especially authorized, cancellations, arbitrary check marks, and the like must not be used either as partial or entire answers to inquiries.
- 5 Reports should be made out by means which result in a permanent record. The copy in all cases shall be made out in permanent black ink or with permanent black typewriter ribbon. Entries of a contrary or opposite character (such as decreases reported in a column providing for both increases and decreases) should be shown in red ink or enclosed in parentheses.
- 6 This report will be scanned in. Please bind with clips only.
- 7 Answers to inquiries contained in the following forms must be complete. No answer will be accepted as satisfactory which attempts by reference to any paper, document, or return of previous years or other reports, other than the present report, to make the paper or document or portion thereof thus referred to a part of the answer without setting it out. Each report must be complete within itself.
- 8 In cases where the schedules provided in this report do not contain sufficient space for the information called for, or if it is otherwise necessary or desirable, additional statements or schedules may be inserted for the purpose of further explanation of accounts or schedules. They should be legibly made on paper of durable quality and should conform with this form in size of page and width of margin. This also applies to all special or unusual entries not provided for in this form. Where information called for herein is not given, state fully the reason for its omission.
- 9 Schedules supporting the revenue accounts and furnishing statistics should be so arranged as to effect a division in the operations as to those inside and outside the state.
- 10 Answers to all inquiries may be in even dollar figures, with the cents omitted and with agreeing totals.
- 11 Each respondent should make its report in duplicate, retaining one copy for its files for reference, in case correspondence with regard to such report becomes necessary. For this reason, several copies of the accompanying forms are sent to each utility company concerned.

## REPORT TO THE ARKANSAS PUBLIC SERVICE COMMISSION

Give the name, title, office address, telephone number and e-mail address of the person to whom any correspondence concerning this report should be addressed:

Name Kimberly Geuder Title Compliance Reporting Specialist

Address P.O. Drawer 200, , Winter Park, FL 32790-0200

Telephone Number 407-740-8575

E-Mail kgeuder@tminc.com

Give the name, address, telephone number and e-mail address of the resident agent:

Name The Corporation Company Telephone Number 501-244-9034

Address 124 West Capitol Avenue Suite 1900 Little Rock, AR 72201-3736

E-Mail \_\_\_\_\_

## REPORT TO THE ARKANSAS PUBLIC SERVICE COMMISSION

### IDENTITY OF RESPONDENT

1. Give the exact name by which respondent was known in law at the close of the year. Use the Initial word "The" only when it is part of the name:

Matrix Telecom, Inc.

2. Give the location (including street and number) of (a) the main Arkansas business office of respondent at the close of the year, and (b) if respondent is a foreign corporation, the main business office if not in this state:

(a) The Corporation Company  
124 West Capitol Avenue Suite 1900  
Little Rock, AR 72201-3736

(b) 433 E. Las Colinas Blvd Suite 500  
Irving, TX 75039

3. Indicate by an **x** in the proper space (a) the type of service rendered, and (b) the type of organization under which respondent was operating at the end of the year:

(a) ( ) Electric, ( ) Gas, ( ) Water, (**x**) Telephone, ( ) Other

(b) ( ) Proprietorship, ( ) Partnership, ( ) Joint Stock Association,  
(**x**) Corporation, ( ) Other (describe below):

4. If respondent is not a corporation, give (a) date of organization, and (b) name of the proprietor or the names of all partners, and the extent of their respective interest at the close of the year.

(a) N/A

(b)

5. If a corporation, indicate (a) in which state respondent is incorporated (b) date of incorporation, and (c) designation of the general law under which respondent was incorporated, or, if under special charter, the date of passage of the act:

(a) Texas

(b) 6/13/1990

(c)

6. State whether or not respondent during the year conducted any part of its business within the State of Arkansas under a name or names other than that shown in response to inquiry No. 1 above, and, if so, give full particulars:

Matrix Business Technologies, Vartec Telecom; Excel Telecommunications, Americatel

## REPORT TO THE ARKANSAS PUBLIC SERVICE COMMISSION

7. State whether respondent is a consolidated or merged company. If so, (a) give date and authority for each consolidation or merger, (b) name all constituent and merged companies, and (c) give like particulars as required of the respondent in inquiry No.5 above:

(a) The company is not a consolidated or merged company.

(b)

(c)

8. State whether respondent is a reorganized company. If so, give (a) name of original corporation, (b) date of reorganization, (c) reference to the laws under which it was reorganized and (d) state the occasion of the reorganization, whether because of foreclosure or mortgage or otherwise, giving full particulars.

(a) The company is not a reorganized company.

(b)

(c)

(d)

9. Was respondent subject to a receivership or other trust at any time during the year? No  
If so, state:

(a) Name of receiver or trustee: \_\_\_\_\_

(b) Name of beneficiary or beneficiaries for whom trust was maintained:  
\_\_\_\_\_

(c) Purpose of the trust: \_\_\_\_\_

(d) Give (1) date of creation of receivership or other trust, and (2) date of acquisition  
of respondent: (1) \_\_\_\_\_ (2) \_\_\_\_\_

10. Did the respondent act in any of the capacities listed in Paragraph (a) below during the past year? No If so,

(a) Indicate the applicable one by using an **X** in the proper space:

( ) Guarantor, ( ) Surety, ( ) Principal -- obligor to a surety contract,  
( ) Principal --obligator to a guaranty contract.

(b) Insert a statement showing the character, extent, and terms of the primary agreement or obligation, including (1) names of all parties involved, (2) extent of liability of respondent, whether contingent or actual, (3) extent of liabilities of the other parties, whether contingent or actual, and (4) security taken or offered by respondent.

## REPORT TO THE ARKANSAS PUBLIC SERVICE COMMISSION

### DIRECTORS

Give the name and office addresses of all directors at the close of the year, and dates of beginning and expiration of terms. Chairman (\*) and Secretary (\*\*) marked by asterisks.

Name of Director	Office Address	Date of Term	
		Beginning	End
Robert Beaty	433 E. Las Colinas Blvd, Suite 500, Irving, TX 75039	inception of company	perpetual

### PRINCIPAL OFFICERS AND KEY MANAGEMENT PERSONNEL

Give the title of the principal officers, managers and key personnel, the names and office addresses of persons holding such positions at the close of the year.

Title	Name of person holding office at close of year	Office Address
President & Director	Robert Beaty	433 E. Las Colinas Blvd, Suite 500, Irving, TX 75039
CFO	Doug Funsch	433 E. Las Colinas Blvd, Suite 500, Irving, TX 75039

REPORT TO THE ARKANSAS PUBLIC SERVICE COMMISSION

**GROSS ASSESSABLE REVENUES**

Description	Amount
ARKANSAS GROSS ASSESSABLE REVENUES (excluding Interstate Tolls)	\$159,944

**LOCAL EXCHANGE SERVICE STATISTICS**

ACCESS LINES	ARKANSAS
Residence	76
Business	45
TOTAL RESIDENTIAL & BUSINESS ACCESS LINES	121
PBX Access Lines	0
Coin or Credit Card Paystation Access Lines	0
Company Official Access Lines (Numbers)	0
TOTAL ACCESS LINES	121



REPORT TO ARKANSAS PUBLIC SERVICE COMMISSION

**STATEMENT OF ACCURACY**

I do hereby state that the amounts contained in this report are true and accurate, schedules have been cross-referenced by use of the attached check list, and that the accuracy of all totals has been verified by me or under my supervision. Should I or anyone under my supervision become aware of any error in or omission from this report, I will take steps to notify the Arkansas Public Service Commission of such error or omission and provide corrected schedules as soon as possible.

A handwritten signature in cursive script, appearing to read "Robert M. Dwyer", is written over a horizontal line.

President/General Manager

## COMPANY CONTACTS

Company Information	
<b>Company Name</b>	Matrix Telecom, Inc.
<b>dba</b>	Matrix Business Technologies, Vartec Telecom; Excel Telecommunications, Americatel
<b>Official Mailing Address</b>	433 E. Las Colinas Blvd, Suite 500 Irving, TX 75039
<b>Mailing Address for APSC Annual Assessment Invoice</b>	PO Drawer 200 Winter Park, FL 32790-0200

AREA	PERSON TO CONTACT	PHONE #	FAX #	E-MAIL
Annual Report	Kimberly Geuder	407-740-8575	407-740-0613	kgeuder@tminc.com
APSC Annual Assessment	Kimberly Geuder	407-740-8575	407-740-0613	kgeuder@tminc.com
Tariffs	Thomas M. Forte	407-740-3001	407-740-0613	tforte@tminc.com
Property Taxes	N/A	N/A	N/A	N/A
Regulatory Affairs	Alex Valencia	972-910-1720	866-418-9750	avalencia@impacttelcom.com

Please list the number of utility employees located in Arkansas

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